

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

PAGE 11 OF 25
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)
Planned Parenthood Action Fund of Santa Barbara, Ventura and San Luis Obispo Counties

Full Name (Last, First, Middle Initial) of Payee
Planned Parenthood Action Fund of Santa Barbara,
Ventura and San Luis Obispo Counties

Mailing Address

518 Garden Street

City State Zip Code

Santa Barbara , CA 93101

Purpose of Expenditure

Phone Banking

Category/
Type 004

Date

MM / DD / YYYY
10 / 25 / 2012

Amount

104.30

Name of Federal Candidate Supported or Opposed by Expenditure:

Julia Brownley

Office Sought: ☒ House State: CA
☐ Senate District: 26
☐ President

Check One: ☒ Support ☐ Oppose

Calendar Year-To-Date Per Election
for Office Sought

10,385.97

Disbursement For: ☐ Primary ☒ General 12
☐ Other (specify)

Full Name (Last, First, Middle Initial) of Payee
Planned Parenthood Action Fund of Santa Barbara,
Ventura and San Luis Obispo Counties

Mailing Address

518 Garden Street

City State Zip Code

Santa Barbara , CA 93101

Purpose of Expenditure

Phone Banking

Category/
Type 004

Date

MM / DD / YYYY
10 / 30 / 2012

Amount

122.90

Name of Federal Candidate Supported or Opposed by Expenditure:

Lois Capps

Office Sought: ☒ House State: CA
☐ Senate District: 24
☐ President

Check One: ☒ Support ☐ Oppose

Calendar Year-To-Date Per Election
for Office Sought

9,882.41

Disbursement For: ☐ Primary ☒ General 12
☐ Other (specify)

Full Name (Last, First, Middle Initial) of Payee

Square One Consulting, LLC

Mailing Address

1382 Berkeley Ave.

City State Zip Code

St. Paul , MN 55105

Purpose of Expenditure

Minutes for Phone Banking

Category/
Type 004

Date

MM / DD / YYYY
10 / 30 / 2012

Amount

65.85

Name of Federal Candidate Supported or Opposed by Expenditure:

Lois Capps

Office Sought: ☒ House State: CA
☐ Senate District: 24
☐ President

Check One: ☒ Support ☐ Oppose

Calendar Year-To-Date Per Election
for Office Sought

9,882.41

Disbursement For: ☐ Primary ☒ General 12
☐ Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures

293.05

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures
(carry total from last page forward to Line 7)

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